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Special report adds nothing new, say paper authors

R G Carpenter, honorary professor¹, A Waite, national co-ordinator, CONI Programme², R C Coombs, consultant neonatologist³, C Daman-Willems, consultant paediatrician⁴, A McKenzie, research fellow⁵, J Huber, consultant paediatric pathologist (retired)⁶

¹Medical Statistics Unit, Department of Epidemiology and Population Science, London School of Hygiene and Tropical Medicine, London WC1E 7HT bob.carpenter@lshtm.ac.uk
²Academic Unit of Child Health, University of Sheffield, Sheffield Children’s Hospital, Sheffield S10 2TH
³Neonatal Intensive Care Unit, Jessop Wing, Royal Hallamshire Hospital, Sheffield S10 2SF
⁴University Hospital, Lewisham, London SE13 6LH
⁵Medical Statistics Unit, Department of Epidemiology and Population Science, London School of Hygiene and Tropical Medicine
⁶University Hospital for Children and Youth, 3501 CA Utrecht, Netherlands

We were disappointed that Gornall's article¹ was published without a response from us. It added nothing new.² ³ Our paper reviewed the first 57 deaths on the CONI (Care Of Next Infant) programme. We reaffirm that nine deaths were inevitable (recognised cause), and of the 48 unexpected deaths, seven were probable homicide.

Professor Emery led the CONI steering group until his death (2000). We did not materially change the cause of death for any case he knew about.

There are differences between an earlier report⁴ and subsequent full paper.² In the Lancet, we reported but excluded from analysis deaths over one year and clarified “non-natural” deaths. Four infants who died in bed with their parents were initially classified as “non-natural” as they were possibly accidental and avoidable. They were subsequently categorised as SIDS in line with the CESDI SUDI study.⁵ The “non-natural” group initially also included cases recorded as open verdict; their reclassification is detailed. These revisions account for the difference between 14/44 “non-natural” in our earlier report and 7/57 probable infant homicide in the Lancet. No case previously attributed to either NAI or suspected or proven filicide was reclassified.

The assertion that “no explanation for the decision to categorise as natural all 13 deaths for which there was insufficient evidence to reach a conclusion” is a misrepresentation of our text. This states “Eight of these CONI deaths were certified as SIDS. None were attributed to homicide or non-accidental injury.” The assertion that, “In five of these cases a police investigation was under way” is not correct. All investigations were complete before the paper was submitted for publication.
For risk factors even to suggest homicide, their prevalence must be known in all relevant groups.

Footnotes

- Competing interests: None declared.

References